## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

BOS-31032(1)

| Encouve October 1, 2000                                  |  |  |                        |                      |   |   |           |                    |                        | <u> </u>  | 1026   |                        |  |  |  |  |  |  |  |  |  |  |
|--|--|--|------------------------|----------------------|---|---|-----------|--------------------|------------------------|-----------|--|------------------------|--|--|--|--|--|--|--|--|--|--|
|  |  | CLAIMS AS  | S FILED - I<br>(Column |                      | (Column 2)                                |   |           | SMALL ENTITY TYPE  |                        | OR        | OTHER THAN OR SMALL ENTITY   |                        |  |  |  |  |  |  |  |  |  |  |
| TOTAL CLAIMS 60  |  |  |                        |                      |   | *************************************** | _         | RATE               | FEE                    | 1 1       | RATE   | FEE                    |  |  |  |  |  |  |  |  |  |  |
| FOR  |  |  | NUMBER F               | ILED                 | NUMBI                                     | NUMBER EXTRA                            |           | BASIC FEE          | 355.00                 | OR        | BASIC FEE  | 710.00                 |  |  |  |  |  |  |  |  |  |  |
| TOTAL CHARGEABLE CLAIMS                                  |  |  | () () minus 20=        |                      | · 40                                      |   |           | X\$ 9=             | 360                    | OR        | X\$18=   |                        |  |  |  |  |  |  |  |  |  |  |
| IND  | DEPENDENT CL                                   | AIMS   | 14 mir                 | nus 3 =              | 11  | ·/ [                                    |           | X40=               | can                    | OR        | X80=   | =                      |  |  |  |  |  |  |  |  |  |  |
| ΜU   | ILTIPLE DEPEN                                  | IDENT CLAIM PR   | RESENT                 |                      |   |   |           | +135=              |                        | OR        | +270=  |                        |  |  |  |  |  |  |  |  |  |  |
| * If the difference in column 1 is less than zero, enter |  |  |                        |                      | r "0" in c                                | olumn 2                                 | L         | TOTAL              | 1150                   | OR        | TOTAL  |                        |  |  |  |  |  |  |  |  |  |  |
| CLAIMS AS AMENDED - PART II                              |  |  |                        |                      |   | <b></b>                                 |           | OTHER THAN         |                        |           |  |                        |  |  |  |  |  |  |  |  |  |  |
| _  |  | (Column 1)<br>CLAIMS   |                        | (Colur               | mn 2)<br>HEST                             | (Column 3)                              | ,         | SMALL              | <del></del>            | OR<br>1 [ | SWALL  |                        |  |  |  |  |  |  |  |  |  |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                        |                        | NUM<br>PREVIO        | MBER                                      | PRESENT<br>EXTRA                        |           | RATE               | ADDI-<br>TIONAL<br>FEE |           | RATE   | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |  |  |  |  |  |
| MON  | Total  | *  | Minus                  | **                   |   | =                                       |           | X\$ 9=             |                        | OR        | X\$18=   |                        |  |  |  |  |  |  |  |  |  |  |
| AME  | Independent                                    | *  | Minus                  | ***                  |   | =                                       | r         | X40=               |                        | OR        | X80=   |                        |  |  |  |  |  |  |  |  |  |  |
| Ļ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |  |                        |                      | CLAIM                                     |   |           | +135=              |                        | OR        | +270=  |                        |  |  |  |  |  |  |  |  |  |  |
| ,  |  |  |                        |                      |   |   |           | TOTAL              | <del> </del>           | اا        | TOTAL  | <u> </u>               |  |  |  |  |  |  |  |  |  |  |
|  | (Column 1) (Column 2) (Column 3)               |  |                        |                      |   |   |           | DDIT. FEE          | <u> </u>               | 1 · · ·   | ADDIT. FEE   | <del></del>            |  |  |  |  |  |  |  |  |  |  |
| ENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                        |                        | HIGH<br>NUM<br>PREVI | HEST<br>MBER<br>IOUSLY<br>D FOR           | PRESENT<br>EXTRA                        |           | RATE               | ADDI-<br>TIONAL<br>FEE |           | RATE   | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |  |  |  |  |  |
| <b>AMENDMENT</b>   | Total  | *  | Minus                  | **                   |   | =                                       |           | X\$ 9=             |                        | OR        | X\$18=   |                        |  |  |  |  |  |  |  |  |  |  |
| AME  | Independent                                    | *  | Minus                  | ***                  | T.O                                       | =                                       |           | X40=               |                        | OR        | X80=   |                        |  |  |  |  |  |  |  |  |  |  |
| Ĺ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                        |                      |   |   |           | +135=              |                        | OR        | +270=  |                        |  |  |  |  |  |  |  |  |  |  |
|  |  |  |                        |                      |   |   | L         | TOTAL<br>DDIT. FEE |                        | اما       | TOTAL<br>ADDIT. FEE  |                        |  |  |  |  |  |  |  |  |  |  |
| _  |  | (Column 3)   | Al                     | Joir. PEE            |   | -                                       | انون. FEE |                    |                        |           |  |                        |  |  |  |  |  |  |  |  |  |  |
| AMENDMENT C  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                      |                        | HIGH<br>NUM<br>PREVI | IMN 2)<br>HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA                        |           | RATE               | ADDI-<br>TIONAL<br>FEE |           | RATE   | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |  |  |  |  |  |
| Š  | Total  | *  | Minus                  | **                   |   | =                                       | 1         | X\$ 9=             |                        | OR        | X\$18=   |                        |  |  |  |  |  |  |  |  |  |  |
| MEI  | Independent                                    | *  | Minus                  | ***                  |   | =                                       | 1         | X40=               |                        | 1 1       | X80=   |                        |  |  |  |  |  |  |  |  |  |  |
| <b>L</b>   | FIRST PRESE                                    | NTATION OF M   | ULTIPLE DEI            | PENDEN               | T CLAIM                                   |   | 1  -      |                    | ļ                      | OR        | <del></del>  | <del></del>            |  |  |  |  |  |  |  |  |  |  |
|  | If the enter:                                  | L  | +135=                  |                      | OR  | +270=                                   |           |                    |                        |           |  |                        |  |  |  |  |  |  |  |  |  |  |
| **   | If the "Highest Nu                             | umn 1 is less than t<br>umber Previously P<br>umber Previously P | aid For" IN THI        | IS SPACE             | is less tha                               | an 20, enter "20."                      | AE        | TOTAL<br>DDIT. FEE |                        | OR        | TOTAL<br>ADDIT. FEE  |                        |  |  |  |  |  |  |  |  |  |  |
|  |  |  |                        |                      |   |   | r found   | nd in the ap       | propriate bo           | x in co   | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                        |  |  |  |  |  |  |  |  |  |  |